



NOTICE OF APPEAL FROM THE EXAMINER
TO THE BOARD OF PATENT APPEALS AND INTERFERENCES

Applicants:

Glenn McGall, Lisa Kajisa and Bradley A. Kreger

Serial No.: 09/871,610 Group: 1634

Filed: June 1, 2001 Examiner: Forman, B.J.

Confirmation No.: 1735

For: NEW METHODS FOR ARRAY PREPARATION USING SUBSTRATE
ROTATION

CERTIFICATE OF MAILING OR TRANSMISSION	
I hereby certify that this correspondence is being deposited with the United States Postal Service with sufficient postage as First Class Mail in an envelope addressed to Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450, or is being facsimile transmitted to the United States Patent and Trademark Office on:	
11-24-03	<i>Denise Carideo</i>
Date	Signature
<i>Denise Carideo</i>	
Typed or printed name of person signing certificate	

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Commissioner for Patents
P.O. Box 1450
Alexandria, VA 22313-1450

Sir:

Applicants hereby appeal to the Board of Patent Appeals and Interferences from the decision dated August 26, 2003 of the Examiner finally rejecting claims 1-15. The item(s) checked below are appropriate:

1. ☐ Applicant hereby petitions to extend the time for filing a Notice of Appeal in response to the Office Action Made Final dated [] for [] month(s) from [] to [].
2. ☐ A [] month extension of time to respond to the Office Action Made Final dated [] was filed on [] with payment of a \$[] fee.
☐ Applicant hereby petitions for an additional [] month extension of time to respond to the Office Action Made Final.
3. ☐ A Request for Oral Hearing before the Board of Patent Appeals and Interferences is being filed concurrently herewith.

12/02/2003 SDENR081 00000011 09871610 330.00 OP
01 FC:1401

4. Fees are submitted for the following:

<input type="checkbox"/>	Extension of Time for 1 month		\$	_____
<input type="checkbox"/>	Additional Extension of Time:			
	Fee for Extension	(<input type="checkbox"/> mo.)	\$	_____
	Less fee paid	(<input type="checkbox"/> mo.)	- \$	_____
	Balance of fee due		\$	0
<input checked="" type="checkbox"/>	Notice of Appeal		\$	330
<input type="checkbox"/>	Other	_____	\$	_____
			TOTAL	\$ 330

5. The method of payment for the total fees is as follows:

- ☒ A check in the amount of \$330 is enclosed.
- ☐ Please charge Deposit Account No. 08-0380 in the amount of \$[].

Please charge any deficiency or credit any overpayment in the fees that may be due in this matter to Deposit Account No. 08-0380. A copy of this document is enclosed for accounting purposes.

Respectfully submitted,

HAMILTON, BROOK, SMITH, REYNOLDS, P.C.

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Date: 11-24-03